	Under the Paperwork	Reduction Act of 1995, no ENT APPLICATION Substitut	Manana	111	Dolani	Approved t	Of 1100 (6	PTO/88/00 (124) 7/81/2008. OMB 0651-001 RTMENT OF COMMERCE Yelld OMB control great	
	PATE	NT APPLICATION	ereous are required	1 to respond to a	odlection of inc	rademark Of	100! A'S' DEBY	7/81/2008. OMB 0861-041	
		MOUNT	ree Deteri	A NOITANIN	ECORD	middou Kul	es it displays a	YALL OF COMMERCE	
٠,		ONDAUIG	e for Form PTO-	76		•	Application	or pookel Mamper	
	AP	PLICATION AS FILE) - PART!				147/7	15639	
		(Column 1)							
	FOR		(Column	(2)	SMALL EI	TITY	OR	OTHER THAN	
	BASIC FEE	NUMBER FILED	NUMBER EX	CTRA !		-	-	SMALL ENTITY	
. I	BEARCH FEE	1			RATE(E)	FEE (8)	1 50		
	(\$7 CFR 1.160k) (1 or (m))						100	TE (\$) FEE (\$)	
. [CAAMINATION CCC		\perp	- 11				710	
	101 OFR 1.16(0), (0) or (all						- 1	100	
	TOTAL CLAIMS (37 CFR 1.16(1))	21			1	7	ļ		
- 10	NDEPENDENT OF THE	Mau's 20 =	. 6	X				. 1 7	
. 14	37 CFR 1.16(N)	14 minus 3 =	. //				OR X /	100	
	PPLICATION SIZE	If the specification		X	=	7	Ca	100	
	CF I	sheets of paper, the apples \$250 (\$125 for small	lication size fee	100		\neg	×80	= 880	
16	7 CFR 1.16(s))	additional so shorts	rilly) for each	1 1	- 1	- 1	1	T	
 		35 U.S.C. 41(a)(1)(G) and	action thereof. S	ee	1.]			
MC	MULTIPLE DEPENDENT CLAIM PRESENT (37 OFR 1.16(1))								
	the different	1.16	(I)	_			250		
- 1	in column 1	is less than zero, enter or in	columni 2	-			10/0		
51-07 APPLICATION AS AMENDED - PART II								11.00	
								1078	
								· 1	
∢	CLAI	MS THE		SM.	ALL ENTITY	OR	OTHE	R THAN	
COMAINING							ENTITY		
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1 017	Moderated S	Minus 26	=	1	FEE (\$)	4. 1		TIONAL	
1 31.9	DI CHR LIGHT	Minus ***		×	=	OR	250	FEE (1)	
1314	opplication Size Fee (37 CI	FR 1.16(s))		<u> x</u>	=	7 1	200		
1 16	FIRST PRESENTATION OR X200 =								
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM . (37.CFR 1.16(II)									
TOTAL OR 360									
ADD'L FEE OR TOTAL									
1	CLAIMS	Toolalial.	(Column 3)	• •		1 .	POLLEE F		
	REMAININ AFTER		PRESENT		7	1 -	·	- 1	
12-	AMENDME	T PREVIOUSE PAID FOR	Y EXTRA	RATE (1)	ADDI: . TIONAL		RATE (\$)	400	
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Z hote	pendeni *A 1.160/l	Minus +11	 	Χ =				FEE (\$)	
N Appl	lication Size Fee (37 CFR	1 1	=	l ,		OR X	=		
4	TOTAL FEE (3) CFR	1.16(s))				OR X	=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))									
						OR .			
TOTAL									
ADD'L FEE "If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20". The "Highest Number Previously Paid For IN THIS SPACE is less than 3 enter "20".									
				20			. 1		
ine "H	ighest Number Previously	y Pald For IN THIS SPACE IS Pald For (Total or Independe by 37 CFR 1.16. The Inlomed denilally is governed by	less than 3, enter)·.				7	
PTO to pro	cess) an application Conf.	Paid For (Total or Independe by 37 CFR 1.16. The Information dentially is governed by 35 to	lation is regular to	mber found in the	appropriate box	cia column 1		1 .	
ruding gathe	MOO DEADON	vermanly is governed by 15 in	C 420	Aniani of telain i	a benefit by the			1	